

Fill in this information to identify the case:

Debtor Lebenthal Asset Management, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number 17-13339 (MG)
(if known)

☒ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☒ No. Go to Part 2.
☐ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or part.

If more space is needed for priority unsecured claims, fill out and attach the Additional Page of Part 1.

Total claim Priority amount

2.1 Priority creditor's name and mailing address

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

Is the claim subject to offset?

- ☐ No
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)()

Debtor **Lebenthal Asset Management, LLC**Case number (if known) **17-13339 (MG)****Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If more space is needed for nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.1</div> Nonpriority creditor's name and mailing address <u>Accuity</u> <u>Attn: Officer, Managing or General Agent</u> <u>810 7th Ave #1110</u> <u>New York</u> <u>NY</u> <u>10019</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,709.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.2</div> Nonpriority creditor's name and mailing address <u>Adams, Harkness Asset Management, Inc.</u> <u>Attn: John Adams</u> <u>99 High Street</u> <u>Boston</u> <u>MA</u> <u>02110</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Promissory note</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$292,116.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.3</div> Nonpriority creditor's name and mailing address <u>Advent Software, Inc.</u> <u>Attn: Officer, Managing or General Agent</u> <u>600 Townsend Street, 5th Floor</u> <u>San Francisco</u> <u>CA</u> <u>94103</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.4</div> Nonpriority creditor's name and mailing address <u>American Telephone Company</u> <u>c/o Leslie Martin Shamis</u> <u>64 West Park Ave., 2nd Floor</u> <u>PO Box 570</u> <u>Long Beach</u> <u>NY</u> <u>11561</u> Date or dates debt was incurred <u>8/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>

Debtor Lebenthal Asset Management, LLCCase number (if known) 17-13339 (MG)**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$51,463.00</u>
	<u>Archer</u>	<input type="checkbox"/> Contingent	
	<u>c/o Law Office of David A. Feldheim</u>	<input type="checkbox"/> Unliquidated	
	<u>600 W. Germantown Pike, Ste. 400</u>	<input checked="" type="checkbox"/> Disputed	
	<u>Plymouth Meeting, PA 194262</u>	Basis for the claim:	
		<u>Trade</u>	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.6	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$25,800.00</u>
	<u>Ashland Partners & Co.</u>	<input type="checkbox"/> Contingent	
	<u>Attn: Officer, Managing or General Agent</u>	<input type="checkbox"/> Unliquidated	
	<u>525 Bingham Knoll Drive, mSite 200</u>	<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Jacksonville</u> <u>OR</u> <u>97530</u>	<u>Trade</u>	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Contract between Debtor and Ashland Partners & Co. dated 4/7/14 for firm wide verification and performance examination.

3.7	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$28,645.00</u>
	<u>Broadridge Financial Solutions</u>	<input type="checkbox"/> Contingent	
	<u>Attn: Officer, Managing or General Agent</u>	<input type="checkbox"/> Unliquidated	
	<u>1155 Long Island Avenue</u>	<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Edgewood</u> <u>NY</u> <u>11717</u>	<u>Trade</u>	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.8	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>
	<u>California Franchise Tax Board</u>	<input type="checkbox"/> Contingent	
	<u>Bankruptcy Section, MS: A-340</u>	<input type="checkbox"/> Unliquidated	
	<u>P.O. Box 2952</u>	<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Sacramento</u> <u>CA</u> <u>95812-2952</u>	<u>Notice Only</u>	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor Lebenthal Asset Management, LLCCase number (if known) 17-13339 (MG)**Part 2: Additional Page**

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Amount of claim

3.9	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$50.00</u>
<u>CT Corporation</u>		<input type="checkbox"/> Contingent	
<u>Attn: Adam Steimel, Customer Specialist</u>		<input type="checkbox"/> Unliquidated	
<u>111 8th Avenue, 13th Floor</u>		<input type="checkbox"/> Disputed	
<u>New York NY 10011</u>		Basis for the claim:	
<u>Date or dates debt was incurred</u>		<u>Trade</u>	
<u>Last 4 digits of account number</u>		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.10	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>
<u>Douglas Famigletti</u>		<input type="checkbox"/> Contingent	
<u>232 Jonathan Road</u>		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
<u>New Canaan CT 06840</u>		Basis for the claim:	
<u>Date or dates debt was incurred</u>		<u>Notice Only</u>	
<u>Last 4 digits of account number</u>		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.11	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$5,472.00</u>
<u>EPFR Global</u>		<input type="checkbox"/> Contingent	
<u>Attn: Officer, Managing or General Agent</u>		<input type="checkbox"/> Unliquidated	
<u>80 Sherman Street</u>		<input type="checkbox"/> Disputed	
<u>Cambridge MA 02140</u>		Basis for the claim:	
<u>Date or dates debt was incurred</u>		<u>Trade</u>	
<u>Last 4 digits of account number</u>		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Contract between Debtor and EPFR Global for monthly report tracking equity fund country weighings.

3.12	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$11,187.00</u>
<u>ESRT One Grand Central Place, LLC</u>		<input type="checkbox"/> Contingent	
<u>One Grand Cetnral Place</u>		<input type="checkbox"/> Unliquidated	
<u>60 East 42nd Street</u>		<input type="checkbox"/> Disputed	
<u>New York NY 10017</u>		Basis for the claim:	
<u>Date or dates debt was incurred</u>		<u>Rent</u>	
<u>Last 4 digits of account number</u>		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor **Lebenthal Asset Management, LLC**Case number (if known) **17-13339 (MG)****Part 2: Additional Page**

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Amount of claim

3.13 Nonpriority creditor's name and mailing addressAs of the petition filing date, the claim is:
*Check all that apply.*UnknowneVestment Alliance, LLC☐ ContingentAttn: Officer, Managing or General Agent☐ Unliquidated58 West 40th Street, 4th Floor☐ DisputedNew York NY 10018

Basis for the claim:

Trade

Date or dates debt was incurred _____

Is the claim subject to offset?

Last 4 digits of account number _____

☒ No☐ Yes

Contract dated 1/28/16 between Debtor and eVestment Alliance, LLC to input management information into databases.

3.14 Nonpriority creditor's name and mailing addressAs of the petition filing date, the claim is:
Check all that apply.\$160,762.00Factset Research Systems, Inc.☐ ContingentAttn: Michael Wollins☐ Unliquidated90 Park Avenue☐ DisputedNew York NY 10016

Basis for the claim:

Contract/Lease

Date or dates debt was incurred _____

Is the claim subject to offset?

Last 4 digits of account number _____

☒ No☐ Yes

Master Agreement between Debtor and Factset Research Systems, Inc. dated 2/12/14 for research products.

3.15 Nonpriority creditor's name and mailing addressAs of the petition filing date, the claim is:
Check all that apply.\$990.00FIS Brokerage & Securities Services☐ ContingentAttn: Officer, Managing or General Agent☐ Unliquidated62446 Collections Center Drive☐ DisputedChicago IL 60693

Basis for the claim:

Trade

Date or dates debt was incurred _____

Is the claim subject to offset?

Last 4 digits of account number _____

☒ No☐ Yes**3.16** Nonpriority creditor's name and mailing addressAs of the petition filing date, the claim is:
Check all that apply.\$243,189.00Fortigent☐ ContingentAttn: Brad Jacobs, LPL☐ Unliquidated75 State Street, 24th Floor☐ DisputedBoston MA 02109

Basis for the claim:

Trade

Date or dates debt was incurred _____

Is the claim subject to offset?

Last 4 digits of account number _____

☒ No☐ Yes

Debtor **Lebenthal Asset Management, LLC**Case number (if known) **17-13339 (MG)****Part 2: Additional Page**

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Amount of claim

3.17 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$100,000.00</u>
Gantcher Family Limited Partnership		
Attn: Nathan Gantcher		
767 Third Avenue		
16th Floor		
New York	NY	10017
Date or dates debt was incurred <u>12/29/2015</u>		
Last 4 digits of account number <u> </u>		
Basis for the claim: Promissory Note		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.18 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$150,000.00</u>
Griffin Asset Management, Inc.		
Attn: Douglas M. Famigletti, CFA		
230 Park Ave, 10th Floor, Ste 61		
New York	NY	10169
Date or dates debt was incurred <u> </u>		
Last 4 digits of account number <u> </u>		
Basis for the claim: Promissory Note		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Does not include interest		
3.19 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$27,596.00</u>
Hamburger Law Firm		
c/o Gary Grant, GGR Inc.		
5858 Westheimer Road, #500		
Houston	TX	77057
Date or dates debt was incurred <u> </u>		
Last 4 digits of account number <u> </u>		
Basis for the claim: Attorney Fees		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
In collections		
3.20 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>Unknown</u>
i-Impact Group, Inc.		
Attn: Officer, General or Managing Agent		
40 Ettl Lane		
Greenwich	CT	06831
Date or dates debt was incurred <u> </u>		
Last 4 digits of account number <u> </u>		
Basis for the claim: Trade		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Letter agreement between Debtor and i-Impact Group, dated in or about 2013 for public relations announcements.		

Debtor **Lebenthal Asset Management, LLC**Case number (if known) **17-13339 (MG)****Part 2: Additional Page**

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Amount of claim

3.21 Nonpriority creditor's name and mailing addressAs of the petition filing date, the claim is:
*Check all that apply.*Unknown**Interactive Data**

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☒
- Disputed

Attn: Officer, General or Managing Agent**100 Church Street, #11**

Basis for the claim:

New York NY 10007**Trade**

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

- ☒
- No
-
- ☐
- Yes

NEED CONTRACT DESCRIPTION**3.22** Nonpriority creditor's name and mailing addressAs of the petition filing date, the claim is:
Check all that apply.\$0.00**Internal Revenue Service**

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Centralized Insolvency Operations**P.O. Box 7346**

Basis for the claim:

Philadelphia PA 19101-7346**Notice Only**

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

- ☒
- No
-
- ☐
- Yes

3.23 Nonpriority creditor's name and mailing addressAs of the petition filing date, the claim is:
Check all that apply.\$23,944.00**InvestorTools**

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Attn: Officer, Managing or General Agent**100 Bridge Street Plaza**

Basis for the claim:

Yorkville IL 60560**Trade**

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

- ☒
- No
-
- ☐
- Yes

NEED CONTRACT DESCRIPTION**3.24** Nonpriority creditor's name and mailing addressAs of the petition filing date, the claim is:
*Check all that apply.*Unknown**Jeremy Diamond**

- ☒
- Contingent
-
- ☒
- Unliquidated
-
- ☒
- Disputed

c/o Berlandi Nussbaum & Reitzas**527 Route 22, Suite 2**

Basis for the claim:

Pawling NY 12564**Guaranty**

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

- ☒
- No
-
- ☐
- Yes

Debtor **Lebenthal Asset Management, LLC**Case number (if known) **17-13339 (MG)****Part 2: Additional Page**

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Amount of claim

3.25 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$100,000.00</u>
<hr/>		
Joel Jacks	<input type="checkbox"/>	
545 Claflin Avenue	<input type="checkbox"/>	
<hr/>		
Mamaroneck NY 10543	<input type="checkbox"/>	
<hr/>		
Date or dates debt was incurred 12/29/2015	Basis for the claim: Promissory Note	
Last 4 digits of account number _ _ _ _	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>		
3.26 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$0.00</u>
<hr/>		
John Cahill, Esq.	<input type="checkbox"/>	
Regional Counsel for NY/NJ	<input type="checkbox"/>	
U.S. Dept of Housing & Urban Development	<input type="checkbox"/>	
26 Federal Plaza, Room 3500		
New York NY 10278-0068	Basis for the claim: Notice Only	
<hr/>		
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _ _ _ _		
<hr/>		
3.27 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$100,000.00</u>
<hr/>		
Joseph J. Plumeri II	<input type="checkbox"/>	
654 Madison Ave, Suite 705	<input type="checkbox"/>	
<hr/>		
New York NY 10065	Basis for the claim: Note	
<hr/>		
Date or dates debt was incurred 12/29/2015	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _ _ _ _		
<hr/>		
3.28 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$28,912.00</u>
<hr/>		
Kelley Drye & Warren LLP	<input type="checkbox"/>	
Attn: Timothy Lavender, Esq.	<input type="checkbox"/>	
101 Park Avenue	<input type="checkbox"/>	
<hr/>		
New York NY 10178	Basis for the claim: Attorney Fees	
<hr/>		
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _ _ _ _		

Debtor Lebenthal Asset Management, LLC

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Part 2: Additional Page

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.29</div> Nonpriority creditor's name and mailing address <u>Kupfer & Associates</u> <u>Attn: Corey Kupfer, Esq.</u> <u>800 Westchester Ave, Ste 641N</u> <u>Rye Brook</u> <u>NY</u> <u>10573</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Attorney Fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,221.00</u>
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.30</div> Nonpriority creditor's name and mailing address <u>Lebenthal & Co., LLC</u> <u>17 East 96th Street, #9A</u> <u>New York, NY 10128</u> <u>Attn: Alexandra Lebenthal</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Intercompany debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.31</div> Nonpriority creditor's name and mailing address <u>Lebenthal Family Office, LLC</u> <u>c/o Gordian Group LLC</u> <u>950 Third Avenue, 17th Floor</u> <u>New York, NY 10022</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Intercompany debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.32</div> Nonpriority creditor's name and mailing address <u>Lebenthal Holdings, LLC</u> <u>c/o Gordian Group LLC</u> <u>950 Third Avenue, 17th Floor</u> <u>New York, NY 10022</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Intercompany debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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Debtor Lebenthal Asset Management, LLCCase number (if known) 17-13339 (MG)**Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.33</div> Nonpriority creditor's name and mailing address <u>Lebenthal Wealth Advisors, LLC</u> <u>c/o Gordian Group LLC</u> <u>950 Third Avenue, 17th Floor</u> <u>New York, NY 10022</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Intercompany debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.34</div> Nonpriority creditor's name and mailing address <u>Lincoln Building Associates, L.L.C.</u> <u>Attn: Officer, Managing or General Agent</u> <u>60 East 42nd Street, #803</u> New York NY 10165 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.35</div> Nonpriority creditor's name and mailing address <u>Louis A. Matis</u> <u>775 Flintlock Road</u> Southport CT 06490 Date or dates debt was incurred <u>12/29/2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Promissory note</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$50,000.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.36</div> Nonpriority creditor's name and mailing address <u>Michigan Dept. of Treasury</u> <u>Tax Policy Division; Attn: Litigation Li</u> <u>2nd Floor, Austin Building</u> <u>430 West Allegan Street</u> Lansing MI 48922 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>

Debtor Lebenthal Asset Management, LLCCase number (if known) 17-13339 (MG)**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.37	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$63,478.00</u>
	<u>MSCI Inc.</u>	<input type="checkbox"/> Contingent	
	<u>Attn: Officer, Managing or General Agent</u>	<input checked="" type="checkbox"/> Unliquidated	
	<u>250 Greenwich Street</u>	<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>New York NY 10007</u>	<u>Contract</u>	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Contract between Debtor and MSCI Inc. for research services.

3.38	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>
	<u>NYC Dept. of Finance</u>	<input type="checkbox"/> Contingent	
	<u>345 Adams Street, 3rd Floor</u>	<input type="checkbox"/> Unliquidated	
	<u>Attn: Legal Affairs Division</u>	<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Brooklyn NY 11201-3719</u>	<u>Notice Only</u>	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.39	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>
	<u>NYS Dept. Taxation & Finance</u>	<input type="checkbox"/> Contingent	
	<u>Bankruptcy/Special Procedures Section</u>	<input type="checkbox"/> Unliquidated	
	<u>P.O. Box 5300</u>	<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Albany NY 12205-0300</u>	<u>Notice Only</u>	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.40	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>
	<u>NYS Unemployment Insurance Fund</u>	<input type="checkbox"/> Contingent	
	<u>Attn: Officer, Managing or General Agent</u>	<input type="checkbox"/> Unliquidated	
	<u>P.O. Box 551</u>	<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Albany NY 12201</u>	<u>Notice Only</u>	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor Lebenthal Asset Management, LLCCase number (if known) 17-13339 (MG)**Part 2: Additional Page**

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Amount of claim

3.41 Nonpriority creditor's name and mailing addressAs of the petition filing date, the claim is:
*Check all that apply.*UnknownNYSE Market Inc.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Attn: Officer, Managing or General Agent11 Wall Street

Basis for the claim:

New York NY 10007Contract/Lease

Date or dates debt was incurred _____

Is the claim subject to offset?

Last 4 digits of account number _____

- ☒
- No
-
- ☐
- Yes

Contract between Debtor and NYSE Market Inc. for market data.

3.42 Nonpriority creditor's name and mailing addressAs of the petition filing date, the claim is:
*Check all that apply.*UnknownOptions Price Reporting Authority

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Attn: Officer, Managing or General AgentOne North Wacker Dr.

Basis for the claim:

Chicago IL 60606Trade

Date or dates debt was incurred _____

Is the claim subject to offset?

Last 4 digits of account number _____

- ☒
- No
-
- ☐
- Yes

Contract between Debtor and Options Price Reporting Authority for market data.

3.43 Nonpriority creditor's name and mailing addressAs of the petition filing date, the claim is:
Check all that apply.\$0.00Parking Violations Bureau

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

210 Joralemon Avenue

Basis for the claim:

Brooklyn NY 11201Notice Only

Date or dates debt was incurred _____

Is the claim subject to offset?

Last 4 digits of account number _____

- ☒
- No
-
- ☐
- Yes

3.44 Nonpriority creditor's name and mailing addressAs of the petition filing date, the claim is:
Check all that apply.\$50,000.00Peter Shulte

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

c/o Carl Marks & Co.900 Third Ave., 33rd Floor

Basis for the claim:

New York NY 10022Promissory noteDate or dates debt was incurred 12/29/2015

Is the claim subject to offset?

Last 4 digits of account number _____

- ☒
- No
-
- ☐
- Yes

Debtor Lebenthal Asset Management, LLCCase number (if known) 17-13339 (MG)**Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.45</div> Nonpriority creditor's name and mailing address <u>Pitney Bowes Global Financial Services</u> <u>Attn: Officer, Managing or General Agent</u> <u>P.O. Box 371887</u> <u>Pittsburgh</u> <u>PA</u> <u>15250-7887</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Equipment Lease</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ \$1,985.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.46</div> Nonpriority creditor's name and mailing address <u>Purchase Power</u> <u>Attn: Officer, Managing or General Agent</u> <u>P.O. Box 371874</u> <u>Pittsburgh</u> <u>PA</u> <u>15250-7874</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ \$361.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.47</div> Nonpriority creditor's name and mailing address <u>Robert Roberts</u> <u>Office of Site Remediation Enforcement</u> <u>U.S. Environmental Protection-Mail 2272A</u> <u>1200 Pennsylvania Ave, NW</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ \$0.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.48</div> Nonpriority creditor's name and mailing address <u>rpmAUM</u> <u>Attn: Officer, Managing or General Agent</u> <u>c/o Russel M. Parker</u> <u>6515 East Lafayette Boulevard</u> <u>Scottsdale</u> <u>AZ</u> <u>85251</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ \$36,000.00

Debtor Lebenthal Asset Management, LLCCase number (if known) 17-13339 (MG)**Part 2: Additional Page**

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Amount of claim

3.49	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>Unknown</u>
	<u>S&P Securities Evaluations Inc.</u>	<input type="checkbox"/> Contingent	
	<u>Attn: Officer, Managing or General Agent</u>	<input type="checkbox"/> Unliquidated	
	<u>55 Water Street, 45th Floor</u>	<input type="checkbox"/> Disputed	
	<u>New York</u> <u>NY</u> <u>10041</u>	Basis for the claim: <u>Contract/Lease</u>	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Contract between Debtor and S&P Securities Evaluations, Inc. for municipal bond evaluations and statements.

3.50	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$29,017.00</u>
	<u>S&P Securities Evaluations Inc.</u>	<input type="checkbox"/> Contingent	
	<u>Attn: Officer, Managing or General Agent</u>	<input type="checkbox"/> Unliquidated	
	<u>55 Water Street, 45th Floor</u>	<input type="checkbox"/> Disputed	
	<u>New York</u> <u>NY</u> <u>10041</u>	Basis for the claim: <u>Trade</u>	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.51	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>
	<u>Social Security Administration</u>	<input type="checkbox"/> Contingent	
	<u>Off. of Regional Chief Counsel, Region 2</u>	<input type="checkbox"/> Unliquidated	
	<u>26 Federal Plaza, Room 3904</u>	<input type="checkbox"/> Disputed	
	<u>New York</u> <u>NY</u> <u>10278</u>	Basis for the claim: <u>Notice Only</u>	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.52	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$7,110.00</u>
	<u>Telemet</u>	<input type="checkbox"/> Contingent	
	<u>Attn: Officer, Managing or General Agent</u>	<input type="checkbox"/> Unliquidated	
	<u>325 First St</u>	<input type="checkbox"/> Disputed	
	<u>Alexandria</u> <u>VA</u> <u>22314</u>	Basis for the claim: <u>Trade</u>	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor **Lebenthal Asset Management, LLC**Case number (if known) **17-13339 (MG)****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.53</div> Nonpriority creditor's name and mailing address <u>Time Warner Cable 6803</u> <u>Attn: Officer, Managing or General Agent</u> <u>P.O. Box 11820</u> <u>Newark</u> <u>NJ</u> <u>07101-8120</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ \$2,258.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.54</div> Nonpriority creditor's name and mailing address <u>Travelers</u> <u>CL Remittance Center</u> <u>Attn: Officer, Managing or General Agent</u> <u>P.O. Box 660317</u> <u>Dallas</u> <u>TX</u> <u>75266-0317</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ \$578.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.55</div> Nonpriority creditor's name and mailing address <u>U. S. Trustee's Office (Poughkeepsie)</u> <u>74 Chapel Street</u> <u>Albany</u> <u>NY</u> <u>12207</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ \$0.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.56</div> Nonpriority creditor's name and mailing address <u>U.S. Department of Education</u> <u>P.O. Box 5609</u> <u>Greenville</u> <u>TX</u> <u>74503-5609</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ \$0.00

Debtor **Lebenthal Asset Management, LLC**Case number (if known) **17-13339 (MG)****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.57</div> Nonpriority creditor's name and mailing address U.S. Dept. of Health & Human Services Office of the General Counsel 26 Federal Plaza, Room 3908 New York NY 10278 Date or dates debt was incurred _____ Last 4 digits of account number _ _ _ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Notice Only Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ \$0.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.58</div> Nonpriority creditor's name and mailing address U.S. Securities and Exchange Commission New York Regional Office Brookfield Place 200 Vesey Street, Suite 400 New York NY 10281-1022 Date or dates debt was incurred _____ Last 4 digits of account number _ _ _ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Notice Only Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ \$0.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.59</div> Nonpriority creditor's name and mailing address United States Attorney's Office Southern District of New York Attn: Tax & Bankruptcy Unit 86 Chambers Street, Third Floor New York NY 10007 Date or dates debt was incurred _____ Last 4 digits of account number _ _ _ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Notice Only Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ \$0.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.60</div> Nonpriority creditor's name and mailing address United States Trustee's Office Region 2 U.S. Federal Office Building 201 Varick Street, Room 1006 New York NY 10014 Date or dates debt was incurred _____ Last 4 digits of account number _ _ _ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Notice Only Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ \$0.00

Debtor Lebenthal Asset Management, LLC

Case number (if known) 17-13339 (MG)

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<u>eVestment Alliance, LLC</u> <u>Attn: Officer, Managing or General Agent</u> <u>100 Glenridge Point Pkwy, Ste 100</u> <u>Atlanta</u> <u>GA</u> <u>30342</u>	Line <u>3.13</u> <input type="checkbox"/> Not listed. Explain:	____ _ ____ _
4.2	<u>Shelly Stone</u> <u>AYCO Company LP</u> <u>Attn: Officer, Managing or General Agent</u> <u>321 Broadway</u> <u>Saratoga Springs</u> <u>NY</u> <u>12866</u>	Line <u>3.27</u> <input type="checkbox"/> Not listed. Explain:	____ _ ____ _

Debtor Lebenthal Asset Management, LLC

Case number (if known) 17-13339 (MG)

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1

5a. \$0.00

5b. Total claims from Part 2

5b. + \$1,594,843.00

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

5c. \$1,594,843.00